PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

106/1302

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN
(Column 1) (Column 2)								TYPE [OR	SMALL	
TOTAL CLAIMS			(*)					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Α.	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20= *				,	X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus.3-=- *)	×	X42=		OR	X84≃	
MULTIPLE DEPENDENT CLAIM PRESENT							-	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										١٠.٠	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	×	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AIM	=		X42=		OR	X84=	
	THOTTALOL	MATION OF ME	JETHILE DET	LIVOLINI	CLANVI		j	+140=	1 6	OR	+280=	
	•							TOTAL		OR	TOTAL	
ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEE												
		CLAIMS	Dies gerin	HIGH		(Column 3)	7		4001			1001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ⁻	*	Minus	**	t.	=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
								+140=	-	OR	+280=	
			7					TOTAL ADDIT. FEE		OR.	TOTAL ADDIT. FEE	
	100	(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	Many.	OR	X\$18=	a **
	Independent	*	Minus	***		=		X42=	A		X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM	JM ML		_ v	***	OR		
	I A L	* * * * * * * * * * * * * * * * * * * *	79=					+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											4	
		mber Previously P nber Previously Pa					er fo		propriate box			